	PAT	•		ON FEE DET ve Decembe		ON RE	COF	RD.	9	19	00.4	275
CLAIMS AS FILED - PART I								SMALL	ENTITY		ОТН	ER THAN
TOTAL CLAIMS			T	(Column 1) (Col	(Column 2)		TYPE (0	R SMAI	L ENTITY
				· · · · · · · · · · · · · · · · · · ·			RATE		FEE		RATE	FEE
FOR				NUMBER FILED	NUMBER	EXTRA]	BASIC FE	E	_]	BASIC FE	ε
TOTAL CHARGEABLE CLAIMS			<u>. · </u>	minus 2	0= •			X\$ 25=		OF	R X\$50=	
INDEPENDENT CLAIMS				minus 3=				X100=		Of	X200=	
MULTIPLE DEPENDENT CLAIM PRE								+180=		OF	+360=	
lt	the fifterer	nce in column	1 is les	s than zero, ent	er "0" in colur	nn 2	'L	TOTA	-	OF	TOTA	\L
À	CLAIMS AS FILED - PART II (Column 1) (Column 2) (Col					ımn 3)		SMALL	ENTITY	- OR		R THAN L ENTITY
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT	EXTRA		RATE	ADDI TIONA FEE		RATE	- ADDI- TIONA FEE
S	Total	. [Minus	00	=			X\$ 25=		OR	X\$50=	1
-	Independent	1 1	Minus	m 3	=/			X100=	·	OR	X200=	
	FIRST PRESENTATION OF MULTIPLE DEF			PLE DEPENDEN	IT CLAIM			+180=		OR	+360=	1
								TOTAL ODIT. FEE		OR	TOTA ADDIT. FEI	<u> </u>
	(Column 1) (Column 2) (Column 3)							• •				
MENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
בֿל צ	Total	•	Minus ·		=			X\$ 25=		OR	X\$50=	1
¥ I	Independent		Minus	Add	=			X100=		OR	X200=	
	FIRST PRESENTATION OF M			PLE DEPENDEN	T CLAIM			+180=		OR	+360=	· ·
	*						A	TOTAL DOIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1) CLAIMS	,	(Column 2)	(Colum	in 3)						
		REMAINING AFTER AMENDMENT	•	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT E	XTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ן ב	otal ·	•	Minus	f-#	E		X	\$ 25=		or	X\$50=	
	ndependent	•	Minus	***	= .		. ×	(100=		OR	X200=	
F	IRST PRES	ENTATION OF	MULTIP	LE DEPENDENT	CLAIM		+	180=		OR	+360=	
ព ពេ	e "Highest Nu	Imber Previously:	Paid For"	in column 2, write IN THIS SPACE Is	lace than 20 an	iter "20."	AD	TOTAL DIT: FEE		OR ,	TOTAL ADDIT. FEE	
The	0 11801162(14C	imper Previously Pa	Paid For	IN THIS SPACE IS Total or Independen	ina Finedi sodi	0r H2 H	ind in I	the appropr	iale box in	columi	n 1.	